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I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.

By:	Date:									
					MAIL STOP RCE					
	IN THE U	INITED STATES PAT	EN	T AND TRADE	MARK OFFICE					
	Named Inventor: hi Minamino, et a	ป	§ §	Allowed:	August 9, 2004					
Conf.	No.:	7029	ş	Group Art Unit:	2655					
Applr	ı. No.:	10/660,851	\$ \$	Examiner:	Nabil Z. Hindi					
Filing Date:		September 12, 2003	§	Attorney Docket	No.: 10407-11U6					
Title:	OPTICAL DIS	K HAVING WOBBLE	9 PA	TTERNS REPRE	SENTING CONTROL					
		TER ALLOWANCE R XAMINATION (RCE)	-	•						
	This is a reques	t under 37 CFR 1.114 fc	r c	ontinued examina	tion (RCE) of the above					
identi	fied pending appl	ication in response to th	e N	lotice of Allowand	ce. The issue fee has been					
paid.	Enclosed are the	following in support of	the	request under 37	C.F.R. 1.114:					
[X]	A Petition to Withdraw From Issue Under 37 C.F.R. §1.313.									
[]	A Decision granting applicants' Petition to Withdraw From Issue Under 37 C.F.R.									
	§1.313.									
[X]	An Amendment	ł.								
[]	An Information Disclosure Statement, PTO/SB/08A and cited references.									
The fo	ollowing fees are	enclosed:								
[]	RCE fee of \$39	5/\$790.00 required unde	r 3	7 C.F.R. 1.17(e).						
[]	Extension of time fee in the amount of \$00									
[X]	Additional claim fees of \$88.00 for excess claims submitted in the enclosed Amendment,									
	calculated as fol	llows:								

					SMAL	LENTITY	LARGE	ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE	
TOTAL	8	(-)	20	0	x9		x18	
INDEP.	5	(-)	4	1	x44		x88	88
[] lst PR	ESENTATION (OF MU	JLTIPLE DEPENI	DENT CLAIMS	+\$150		+\$300	
					TOTAL		TOTAL	88

- [] Firm check(s) totaling \$___.00 is/are enclosed herewith.
- [X] The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 50-1017 (Billing No. 210407.0060) as noted below. A duplicate copy of this sheet is enclosed.
 - [X] Any overpayments or deficiencies in the above-calculated fee(s).
 - [X] RCE fee in the amount of \$ 790.00.
 - [] Extension fee in the amount of \$.00.
 - [X] Additional claim fees in the amount of \$88.00 as calculated above.
 - [X] Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.
 - [X] In the event that a Petition for Extension of Time is required, but not enclosed, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

October 14, 2004

LOUIS SICKLES II

Registration No. 45,803

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